

## PIDA REPRISAL COMPLAINT FORM

This form must be used to submit complaint of reprisal. Your responses will assist in reviewing the matter under the Public Interest Disclosure (Whistleblower Protection) Act. Please send this form directly to the Division Ombudsman or the Public Interest Commissioner at:

Office of the Superintendent  
3656 1<sup>st</sup> Avenue  
Edson, Alberta  
T7E 1S8  
Phone: 780-723-4471  
Confidential Fax: 780-712-5586  
Toll-free: 800-723-2564

Office of the Public Interest Commissioner (PIC)  
10303 Jasper Avenue NW, Suite 2800  
Edmonton, AB T5J 5C3  
Phone: 780-427-2756  
Fax: 780-427-2759

In Alberta you can call the numbers above toll-free through RITE operator at 310-0000; or North America: (toll-free) 1-888-455-2756

### Reprisal

**24** No person shall take or direct, or counsel or direct a person to take or direct, any of the following measures against an employee because the employee has, in good faith, sought advice about making a disclosure, made a disclosure, cooperated in an investigation under this Act, declined to participate in a wrongdoing or done anything in accordance with this Act:

- (a) a dismissal, layoff, suspension, demotion or transfer, discontinuation or elimination of a job, change of job location, reduction in wages, change in hours of work or reprimand;
- (b) any measure, other than one mentioned in clause (a), that adversely affects the employee's employment or working conditions;
- (c) a threat to take any of the measures mentioned in clause (a) or (b).

### General Information

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Work: \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email (Optional): \_\_\_\_\_

Best Time to Contact                      Day                      Evening                      Weekend

Name of Employer: \_\_\_\_\_ Grande Yellowhead Public School Division

**Information about the Reprisal**

Please provide a brief description of the disclosure of wrongdoing you made or participated in. Please include all relevant dates, locations, etc. Please attach any available supporting documents.

Please provide a description of the reprisal(s) or threat(s) that have occurred or are occurring. Be sure to include all relevant dates, locations, etc. Please attach any available supporting documents.

Is there any additional information about this complaint of reprisal you wish to provide? Please attach any available supporting documents.

**Declaration**

I believe that all the information provided is true to the best of my knowledge.\*

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Signature

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Date

\*Knowingly making a false or misleading statement is an offence pursuant to the Act.